

Incident Report

Print Date/Time: 10/21/2016 14:44

Login ID: ss0100

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00020271

 Incident Date/Time:
 10/10/2016 5:11:00 PM

 Location:
 91ST AVE SE / 8TH ST SE

LAKE STEVENS WA 98258

Phone Number: (425) 359-8043

Report Required: Yes
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens

 Source:
 911

 Priority:
 3

 Status:
 3

Nature of Call:

Unit/Personnel

Unit Personnel
19D1 SS0131-Wells

Person(s)

 No.
 Role
 Name
 Address
 Phone
 Race
 Sex
 DOB

 1
 Driver
 TERRY, JOHNATHON
 15 87TH AVE NE
 (425) 359-8043
 Unknown
 11/18/1991

LANE

Lake Stevens WA 982587378

1 Reporting Party MENDOZA, MALLORY M 219 87TH AVE SE (425) 299-6709 Female 06/16/1984

Lake Stevens WA 98290

Vehicle(s)

Role Make Color License State Type Year Model Involved Vehicle Passenger Car 1991 Honda CIV3D AIX5533 WA Involved Vehicle Passenger Car 2000 Dodge **NEON** ANT3587 WA

Disposition(s)

Disposition Count

R

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

10/10/2016: 17:14:30 SP0421 Narrative: LR421

10/10/2016: 17:14:05 SP0421 Narrative: COL HAPPENED 15AGO.

10/10/2016: 17:13:59 SP0421 Narrative: OTHER VEH LEFT, GRY DODGE NEON NL. RP WAITING IN GRY HONDA CIVIC.

10/10/2016: 17:13:17 SP0407 Narrative: BCST

10/10/2016: 17:12:36 SP0421 Narrative: CC, NON INJ / NON BLKING

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1501971	1 8 27			
	INTERSTATE CITY STREET ISSUED CASE # 2016-0020271	2			
1 2	STATE ROUTE OTHER STOLEN LOCAL AGENCY CODING CODING	3			
2 1	TRIBAL RESERVATION PRIVATE WAY INVOLVED INVOLVED OBJECT STRUCK	0 7 28			
3 1	M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #	3			
	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION				
4	91ST AVE SE BLOCK NO. MILE POST MILE POS				
4a	DISTANCE OF (REFERENCE OR CROSS STREET)				
5	MILES N E STH ST SE				
	UNIT 01 MOTOR VEHICLE PEDAL-CYCLE PAGE THRESHOLD MET YES NO V D: 4252996709	0 1 30			
6	LAST NAME MENDOZA FIRST NAME MALLORY MIDDLE INITIAL M				
	STREET NEW ADDRESS 219 87TH AVE SE				
7	CITY LAKE STEVENS ST WA ZIP 98290	1 2 31			
8	CDL RESTRICTIONS ENDORSEMENTS	2			
9 9	DRIVER'S LICENSE # MENDOMM164LW STATE WA SEX F D.O.B. MMDDYYYY 06 _ 16 _ 1984	3			
10 9	ON DUTY STATUS AIRBAG 2 RESTR. 2 EJECT 1 HELMET USE INJURY 1	1 2 32			
11 3 0	LICENSE PLATE # ANT3587 STATE WA VIN# 1B3ES46C9YD523886				
12 3 0	TRAILER PLATE # STATE STATE STATE	3			
13 2	VEH. YEAR 2000 MAKE DODG MODEL NEON STYLE VEHICLE TOWED YES NO V TOWED BY YES NO V SHICLE. REGISTERED OWNER INFO. OWNED BY DRIVER VEHICLE NO. 1				
14 2	SHADE IN DAMAGED AREA LIABILITY INSURANCE INSURANCE CO				
15 2	VEHICLE YES NO CITATION # CHARGE				
16 2	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE D: 4253598043	9 35			
	LAST NAME TERRY FIRST NAME JOHNATHON MIDDLE INITIAL L				
17	STREET NEW ADDRESS 15 87TH AVE NE # B	37			
18	CITY LAKE STEVENS ST WA ZIP 982587378				
19	CDL RESTRICTIONS ENDORSEMENTS	39			
20	DRIVER'S LICENSE # TERRYJL097QQ STATE WA SEX M D.O.B. MMDDYYYY 1 - 18 - 1991				
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE CLASS 1 NATURE OF INJURIES				
22	LICENSE PLATE # AIX5533 STATE WA VIN# 2HGED6359MH557738				
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	41			
24	VEH. YEAR 1991 MAKE HOND MODEL CIV3D STYLE 2H VEHICLE TOWED TOWED BY REGISTERED OWNER INFO. JOHNATHON TERRY 15 87TH AVE NE#B LAKE STEVENS WA 982587378 D: 4253598043 VEHICLE TOWED TOWED BY VEHICLE TOWED TOWED TOWED BY VEHICLE TOWED BY VEHICLE TOWED	42			
	SHADEN DAMAGED AREA I IABILITY INSURANCE CO VERN FONK 474594959				
25	VEHICLE YES NO CITATION # CHARGE CHARGE VEHICLE YES NO CITATION # CHARGE TO BOTTOM TO B				
26	OFFICER'S NAME (PRINT) C. WELLS #131 BADGE OR ID # AGENCY WA0311900				
	PART A 3000-345-159 R (7/06)				





CORRECTION

REPORT NO.

E598222

72	!		

CASE # 2016-0020271

	ADDITIONAL PERSONS INVOL	VED (PASSENGERS AND	D/OR WITNESSES ONLY)				
NAME (LAST, FIRST, MIDDLE INITIAL)	ABBITTOWNET ENGOTION INVOL	LVED (FXOOENGENOVINE	, on think cools one in				
ADDRESS & PHONE #			SEX D.O.B. MMDDYYYY				
PASSENGER WITNESS UNIT #	SEAT POS. AIRBAG	RESTR. EJECT	HELMET INJURY USE CLASS NATURE OF INJURIES				
NAME (LAST, FIRST, MIDDLE INITIAL)							
ADDRESS & PHONE #			SEX D.O.B. MMDDYYYY				
PASSENGER WITNESS UNIT #	SEAT POS. AIRBAG	RESTR. EJECT	HELMET INJURY CLASS NATURE OF INJURIES				
NAME (LAST, FIRST, MIDDLE INITIAL)							
ADDRESS & PHONE #			SEX D.O.B. MMDDYYYY				
PASSENGER WITNESS UNIT #	SEAT POS. AIRBAG	RESTR. EJECT	HELMET INJURY USE CLASS NATURE OF INJURIES				
		NARRATIVE					
10/10/16 Unit #1 - Mendoza was traveling northbound on 91st Ave SE approaching 8th St SE when she quickly applied the brakes to slow so she could turn left (westbound) onto 8th St SE. Unit #2 - TERRY was following to closely to react and stop in time.							
Unit #2 Terry rearended Unit #1 - Mendoza causing superficial/minor damage to the rear bumper of Unit #1. Unit #2 Terry provided his information to Mendoza as required by law.							
Mendoza left the scene without exchanging information.							
10/12/16 Mendoza filed a claim against Terry's insurance. Terry then provided me with her contact information.							
10/20/16 I was able to contact Mendoza via phone. She stated she was 7 months pregant and was concerned about her baby. She claimed she thought because he hit her she didn't have to provide him with her information. When asked, she admitted she didn't have vehicle insurance of her own on the date of the collision.							
CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)							
C. WELLS #131 NVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	10-20-16 04:21 PI	PLACE SIGNED				
APPROVED BY C. WELLS 0131 DATE 10/20/2016 4:21:58 PM							
BADGE OR ID # 121	ORI# WA0311000	TIME POLICE	DISPATCHED 5-12 PM TIME POLICE ARRIVED 5-16 PM				

